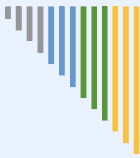


Pandemic Flu & Child Care

Authors:

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This workshop was developed with funds from:

- The Public Health Emergency Preparedness and Response Program of Montgomery County Maryland, Department of Health & Human Services, and
- The Montgomery County Child Care Resource and Referral Center (MCCCR&RC)
- This workshop is based on information from the Department of Maternal & Child Health, University of Carolina/Chapel Hill

Introduce the training. This training is sponsored by the Public Health Emergency Preparedness and Response Program of Montgomery County Maryland, Department of Health and Human Services, in partnership with the Montgomery County Child Care Resource and Referral Center.

Collect pre-test within 10 minutes. Remind participants that they do not need to answer every question correctly, that the purpose of a pre/post test is to assess their growth throughout the course of the training, so no need to be anxious!



Housekeeping

- ☐ Emergency Exits
- ☐ Cell Phones/Texting
- ☐ Credit Issuing
- ☐ Pre Test

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Remind participants to sign-in and all pre-test should be collected at this point. Remind participants of housekeeping and ground rules at trainer discretion. Let participants know that everyone will get credit for three (3) hours, if they receive 75% or better on their post-test, credit will be issued under COK area of health/safety/nutrition; participants with scores of 74% or less will receive clock hours for participating only.

No sign ins allowed 10 minutes after official start of the workshop. Participants may sit in, but will not receive credit.

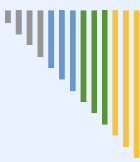
Pre-tests will not be given to participants arriving more than 10 minutes late.
No taking calls or text-messaging during the workshop.

Session is divided into two topics: understanding the clinical aspects of influenza and the considerations to make to continue operations of your program in the event of a pandemic outbreak.



Part 1: Pandemic Influenza



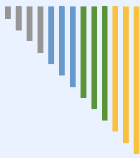


What We Will Learn:

- ☐ State the definition of influenza (the “flu”), list the symptoms of flu and list two ways it spreads.
- ☐ Identify why the pandemic severity index is important.
- ☐ List the medical intervention to prevent the spread of the flu.
- ☐ List the 5 non-medical interventions to prevent the spread of the flu.
- ☐ Identify reliable resources to get updated information on the flu outbreak.

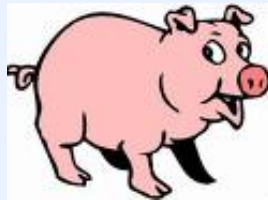
The information presented today is dependent upon the assumption that the H1N1 flu that will circulate this fall will basically resemble the flu we saw in the spring of 2009 in how it is spread, who is most vulnerable and affected and the severity of the associated illness. If the nature of the virus changes the challenges we will face will change and our recommended responses will change.

Group Activity: Instruct participants to look at the person next to them. Each is to tell the other one thing they know about pandemic flu and COOP and one thing they would like to learn about pan flu and COOP. Randomly ask several participants to tell the group what they had told their neighbor. Write the answers on the flip chart.



Sneaky Little Devil

We didn't see him coming!



We have been diligently monitoring avian (bird) in Asia and this little piggy snuck right up on us. H1N1 contains 4 flu viruses, 2 swine, 1 avian and 1 human.

It is very important to understand that all information and recommendations about H1N1 is based on our limited knowledge of the virus and how it is effecting people.

Definition of the Flu

- The flu is a contagious **respiratory illness** caused by influenza viruses. It can cause mild to severe illness, and at times can lead to death.



Stress that the flu a a respiratory illness. Although some people may have some vomiting and diarrhea with the flu it is primarily a respiratory illness. What our mothers call the "stomach flu" is not influenza.

How Flu Spreads

Droplets:

- *Produced by coughing, sneezing, singing, or talking*
- *Large particle droplets which travel about 3 feet through the air*
- *Examples: close contact with person who is infected*



**Source: U.S. Department of Health & Human Services www.hhs.gov/pandemicflu*

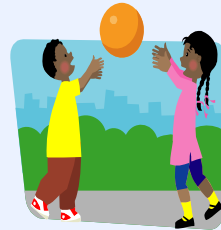
Reinforce:

- Airborne droplets generally travel up to 3 feet and then fall to a surface.
- This is the reason the children's sleeping surfaces need to be at least three feet apart.
- The CDC has recommended that that distance be doubled to six feet when dealing with a ill person. This is not because it causes greater illness it is because most people have absolutely no immunity to this virus.
- You can inhale the droplets directly.

How Flu Spreads

Contact:

- *Caused by physical transfer of germs through skin-to-skin or skin-to-object contact*
- *Examples: Contact with contaminated hands, toys, doorknobs, handrails, etc*

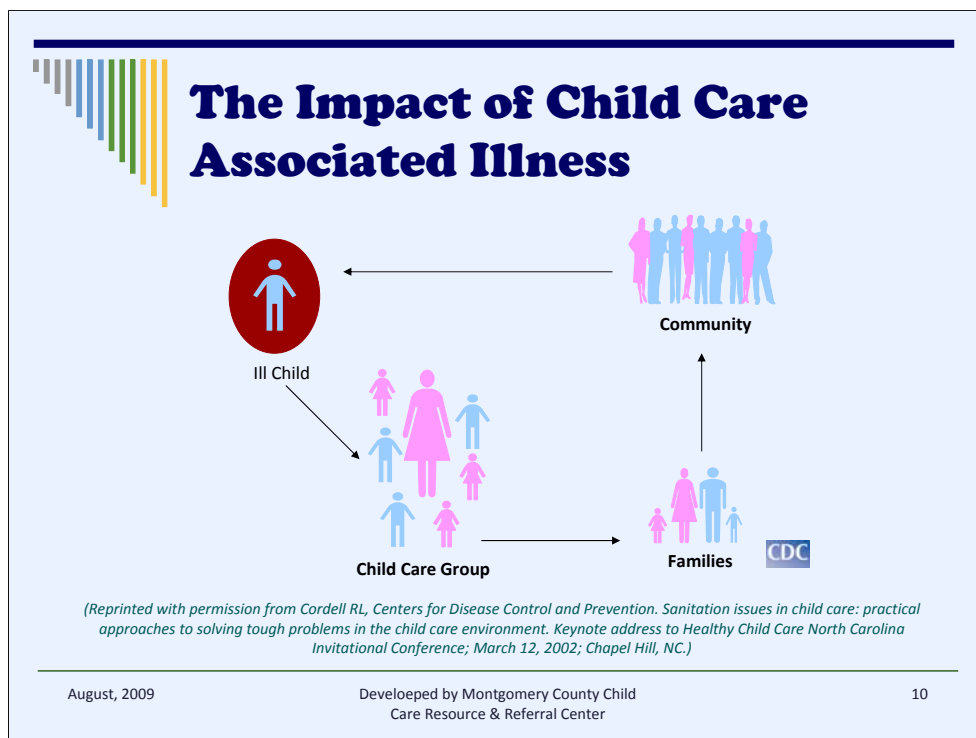


**Source: U.S. Department of Health & Human Services www.hhs.gov/pandemicflu*

You can pick up the germs from objects such as telephones, computer keyboards, toys, door knobs that have been contaminated by an infected person. The virus can live on a surface for up to 8 hours.

The germs can then be transferred on your hands or other objects to your mouth, nose or eyes leading to infection.

We self inoculate with our hands when we put our contaminated hands in our mouths, eyes or nose.



We are all very aware that young children in group care have a considerably higher incidence of common infectious disease because of their age appropriate behaviors. Children frequently have the highest attack rate during a community outbreak of flu and serve as a major source of transmission within the community.

This illustration depicts why child care is at the core of community outbreaks.

One ill child can be expected to infect 50% of his contact in the child care setting. Those infected children can be expected to infect 50% of their household contacts who in turn take the infection into the community.



Persons At High Risk For Getting The Seasonal Flu And Complications

- ☐ Infants, young children & people older than 65
- ☐ Anyone with a chronic disorder (e.g., diabetes; heart, kidney or lung disease; weakened immune system such as from medications, or HIV infection)
- ☐ Women who will be pregnant during flu season
- ☐ Health care workers
- ☐ Anyone in regular, close contact with infants or young children (e.g., child caregivers/ teachers)



Source: Centers for Disease Control and Prevention www.cdc.gov/flu

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This is true for the seasonal flu. With H1N1 we are seeing the greatest number of cases in the 4 to 24 year old group with an out of proportion number of deaths in pregnant women. Approximately 1% of our population is pregnant but 6% of the deaths attributed to H1N1 have been in pregnant women. The over 65 group, thus far, seems not to be getting the infection at the same rate as it is infected by the seasonal flu. The thought is that this age group may have some immunity from flu that circulated early in their lifetime.

Please note that even for seasonal flu child care providers are in the high risk category



Signs & Symptoms of the Flu

- ☐ Fever (as high as 103°F to 105°F in children)
- ☐ Cough
- ☐ Sore throat
- ☐ Headache
- ☐ Muscle ache
- ☐ Extreme tiredness
- ☐ Earache*
- ☐ Nausea and/or vomiting*
- ☐ Diarrhea*

**observed more often in children than adults*

Source: Centers for Disease Control and Prevention www.cdc.gov/flu

With H1N1 we are seeing more vomiting and diarrhea than we usually see.



Is It a Cold, the Flu, or Allergies?

Symptoms	Cold	Flu	Allergies
<i>Symptom Onset</i>	<i>Gradual</i>	<i>Sudden</i>	<i>Varies</i>
<i>Fever</i>	<i>Rare</i>	<i>Characteristic, 102-104</i>	<i>Never</i>
<i>Body aches& pains</i>	<i>Slight</i>	<i>Usual, often severe</i>	<i>Never</i>
<i>Fatigue, weakness</i>	<i>Mild</i>	<i>Can last 2-3 weeks</i>	<i>Sometimes</i>
<i>Extreme Exhaustion</i>	<i>Never</i>	<i>Early, prominent</i>	<i>Never</i>
<i>Stuffy nose</i>	<i>Common</i>	<i>Sometimes</i>	<i>Common</i>
<i>Sneezing</i>	<i>Usual</i>	<i>Sometimes</i>	<i>Usual</i>
<i>Sore Throat</i>	<i>Common</i>	<i>Sometimes</i>	<i>Sometimes</i>
<i>Chest congestion, cough</i>	<i>Mild to moderate, hacking</i>	<i>Common; can become severe</i>	<i>Sometimes</i>

Adapted from various documents: U.S. Department of Health and Human Services, NIH, N.I.A.I.D & FDA

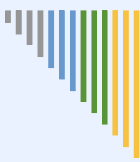
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The Centers for Disease Control define influenza like illness as a fever with a cough and/or a sore throat in absence of any other known cause. On the hand out you can also see a comparison of other common symptoms seen in the flu, a cold and an allergy.

Remember this is a new virus to us and these symptoms can change.



Complications of the Flu

- ☐ Pneumonia
- ☐ Ear infections
- ☐ Sinus infections
- ☐ Dehydration
- ☐ Worsening of chronic medical conditions
- ☐ Death

Source: Centers for Disease Control and Prevention www.cdc.gov/flu

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Handout: *Emergency Warning Signs in Children and Adults*

Point out that the majority of deaths related to H1N1 have occurred in persons with complicating medical conditions such as pregnancy, asthma, etc



Emergency Warning Signs

Seek emergency medical care for any of following warning signs discussed below.

In children:

- ☐ Fast breathing or trouble breathing
- ☐ Bluish skin color
- ☐ Not drinking enough fluids
- ☐ Not waking up or not interacting
- ☐ Sudden dizziness
- ☐ Confusion
- ☐ Fever with a rash
- ☐ Severe or persistent vomiting

- ☐ Being so irritable that the child does not want to be held
- ☐ Flu-like symptoms improve but then return with fever and worse cough

In adults:

- ☐ Difficulty breathing or shortness of breath
- ☐ Pain or pressure in the chest or abdomen

Please refer to your handout on Emergency warning signs.

These warning signs are true for the flu but they are also generally mean that an individual needs to seek medical care.



What Is The Difference Between Endemic, Epidemic And Pandemic?

- Endemic: A disease that is habitually present in the community, region or country.
- Epidemic: A disease occurring suddenly in a community, region or country in numbers clearly in excess of normal.
- Pandemic: An outbreak of an infectious disease which spreads through the human population across a large region e.g. a continent or even worldwide.

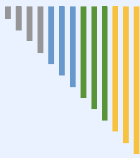
Lets just clarify some terms that you have been hearing since this pandemic began.

Endemic example is malaria in certain African regions .

Epidemic example could be seasonal influenza in Maryland.

Pandemic example is Spanish flu. plaque, smallpox and of course H1N1

Any infectious disease can present in any of these three ways and can move from category to another..



Antigenic Drift or Shift

□ Antigenic Drift

- *Occurs in both A and B Influenza Viruses*
- *Small, gradual mutation*

□ Antigenic Shift

- *Abrupt major change which produces a novel influenza A*
- *Results in a new human influenza A subtype*

Flu Viruses mutate (change) as they go through the susceptible population. They can change in two ways.

The antigenic drift is a small gradual change that occurs in both influenza A and Influenza B. It usually is not as severe because some of the populations will maintain some immunity to it. The drift is what makes it necessary to get a flu shot every year.

The shift is a major change which produces a new influenza A which results in a new human influenza A. The problem here is that the vast majority of people will have no immunity to this virus so the attack rate is extremely high. Shift is what we have experienced with H1N1.



What Are The Differences Between Seasonal Flu And Pandemic Flu?

Seasonal influenza

- ☐ Occurs every year
- ☐ The type of flu people are accustomed to so they usually have some immunity build up from previous exposures
- ☐ Healthy adults usually not at risk for serious complications
- ☐ Vaccine available

Pandemic influenza

- ☐ Occurs rarely (only 3 in 20th century)
- ☐ Worldwide outbreak of a new human flu virus so people have little or no immunity
- ☐ Healthy people may be at increased risk for serious complications

Normal seasonal flu outbreaks are caused by a specific flu viruses every year. This virus is typically more severe than the common cold and can sometimes lead to pneumonia or even death (especially in the elderly population and those with severely low immune systems). Typically, there are 200,000 to 300,000 cases of flu in a year with 30,000 to 40,000 deaths, most of these occur in the elderly or otherwise medically compromised. There aren't more cases or deaths because most healthy persons have built up some type of immunity from previous years of being exposed to the flu virus. For information on finding the seasonal flu vaccine, go to www.findaflushot.com or contact Montgomery County Immunization Program at 240-777-1050.

A pandemic influenza occurs rarely and is caused by a new virus to which humans have little or no immunity built up. Healthy young people may be at an increased risk for serious complications because this group must work, therefore they are out in the environment more, exposing themselves to more people, as well as, holding the belief that they aren't or won't get sick. They also fail to heed the warnings about not going to work when they are sick and spread the infection in the workplace.



Pandemic Flu Defined

"Pandemic flu is virulent human flu that causes a global outbreak, or pandemic, of serious illness. Because there is little natural immunity, the disease can spread easily from person to person."



Source: www.pandemicflu.gov/popup.html

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Note the word pandemic. A pandemic is a virulent infectious disease that causes a global out break of any particular infectious disease.

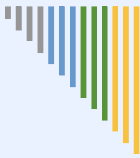
Large group activity:

Have participant name other historical pandemic outbreaks

- HIV/AIDS
- Plague
- Smallpox
- Yellow fever

Have participant name concerns about possible future pandemics

- Viral hemorrhagic fevers
- SARS
- Antibiotic resistance



WHO Pandemic Stages

PHASE 1	<i>No animal influenza virus circulating among animals has been reported to cause infection in humans.</i>
PHASE 2	<i>An animal influenza virus circulating in domesticated or wild animals is known to have caused infection in humans and is therefore considered a specific potential pandemic threat.</i>
PHASE 3	<i>An animal or human-animal influenza reassortant virus has caused sporadic cases or small clusters of disease in people, but has not resulted in human-to-human transmission sufficient to sustain community-level outbreaks.</i>
PHASE 4	<i>Human-to-human transmission (H2H) of an animal or human-animal influenza reassortant virus able to sustain community-level outbreaks has been verified.</i>
PHASE 5	<i>The same identified virus has caused sustained community level outbreaks in two or more countries in one WHO region.</i>
PHASE 6	<i>In addition to the criteria defined in Phase 5, the same virus has caused sustained community level outbreaks in at least one other country in another WHO region.</i>
POST PEAK PERIOD	<i>Levels of pandemic influenza in most countries with adequate surveillance have dropped below peak levels.</i>
POSSIBLE NEW WAVE	<i>Level of pandemic influenza activity in most countries with adequate surveillance rising again.</i>
POST PANDEMIC PERIOD	<i>Levels of influenza activity have returned to the levels seen for seasonal influenza in most countries with adequate surveillance.</i>

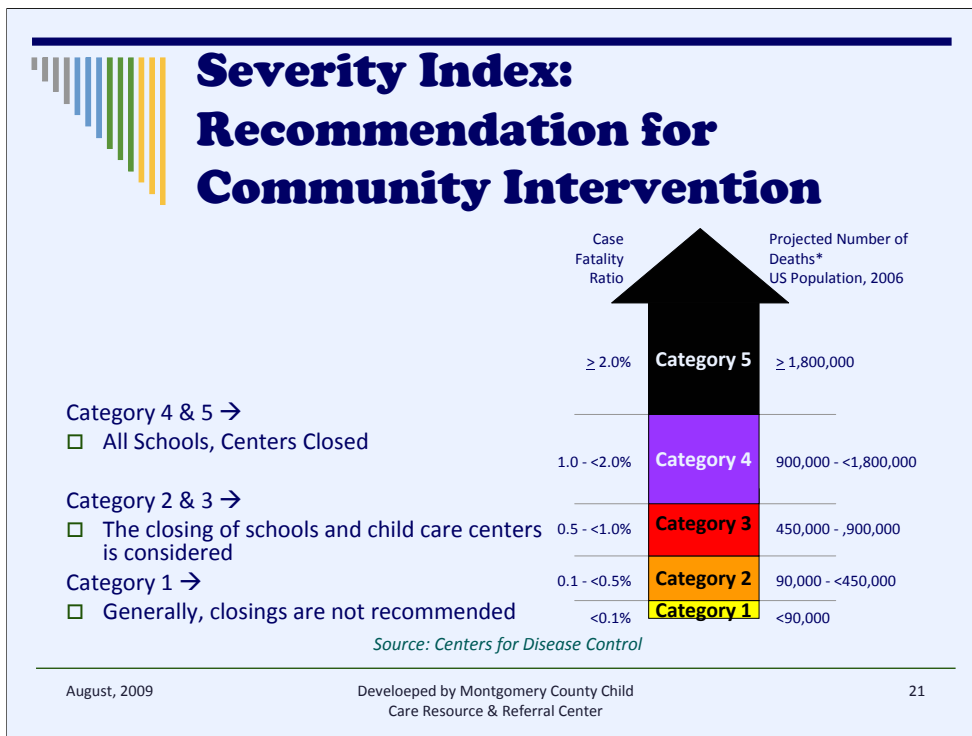
Source: World Health Organization (WHO)

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World Health Organization's pandemic stage refers to how widely and infectious disease has spread and how may case have been confirmed in each of the regions of the world. It doe not refer the the severity of the illness.



The severity index refers to the case fatality rate (the percentage of people with the illness who are dying) It is the severity index that dictates community action

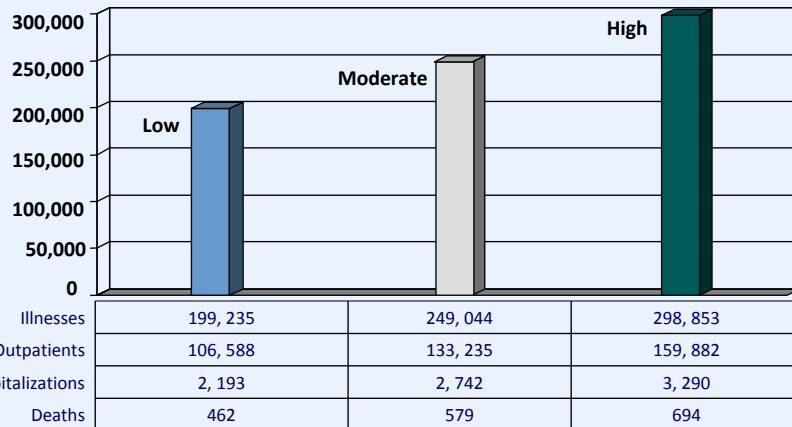
We are currently at between level one and two. To my knowledge at this time there is no thought of closing schools or child care.

The severity index is important because

- Estimates the severity of a pandemic
- Directs recommendations for non-medical community interventions to limit the spread of disease



How many people could be affected in Montgomery County?



Source: Montgomery County, MD Dept. HHS, Public Health Services Emergency Preparedness and Response Program July, 2007

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A pandemic could be very mild where only about 25% of the population may get the flu or it could be very severe where maybe 45% get the flu. This is how it could look in Montgomery County, Maryland. Guide for dealing with a pandemic:



Medical Strategies

□ Vaccination

- *H1N1-expected to be available October 2009.*
- *Seasonal- absolutely paramount for those in contact with young children*

□ Antivirals (oseltamivir [Tamflu], zanamivir)

- *May decrease the severity and duration of symptoms*

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Before we talk about strategies here it is important to know that CDC can only make recommendations. The CDC has no enforcement powers. That lies with the federal, state and local HHS

Why is it so important to get both vaccines this year?

Vaccination is our number one defense against the flu.

Anybody in close contact with infants less than 6 months old has a responsibility to get protected from the flu to keep from bringing the flu to young infants who are not able to receive the vaccine.

- Increased morbidity and mortality
- Possible realignment of the viruses to make a third virus.

See handout on vaccination recommendations.

All of the vaccination timing and recommendations are still not solid. However it appears that healthy adults are developing adequate antibodies from one dose of H1N1 vaccine.

We've seen limited resistance to Tamflu in some cases.



H1N1 Vaccination Recommendations

1. Pregnant women
2. Caregivers of children less than 6 months of age
3. Health care and emergency medical personnel
4. Healthy children and young adults 6 months to 24 years
5. Person 25 through 64 at high risk (asthma, diabetes, Etc)

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Hand Out CDC Flu Vaccine Facts and Myths

These recommendations from ACIP are based on the following assumptions:

- Severity of illness is unchanged from what has been seen
 - Risk groups affected by this virus do not change significantly
 - Vaccine testing suggests safe and efficacious product
 - Adequate supplies of vaccine can be produced
 - No major antigenic changes are evident that would signal the lack of likely efficacy of the vaccines being produced
-
- Check www.earlychildhoodservices.org for information on where to get a vaccination.

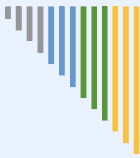


Non-Medical Techniques to Reduce the Spread of Pandemic Flu

1. Respiratory hygiene
2. Hand hygiene
3. Clean environment
4. Exclusion/Isolation
5. Crowd reduction/Social distancing

We cannot stop the spread of the flu but we hopefully can decrease it and slow it down

Handout the illness log and discuss it. It is not a requirement that you keep track of absentees or report H1N1 to the health department but this log may help you keep track of what is happening in your program.

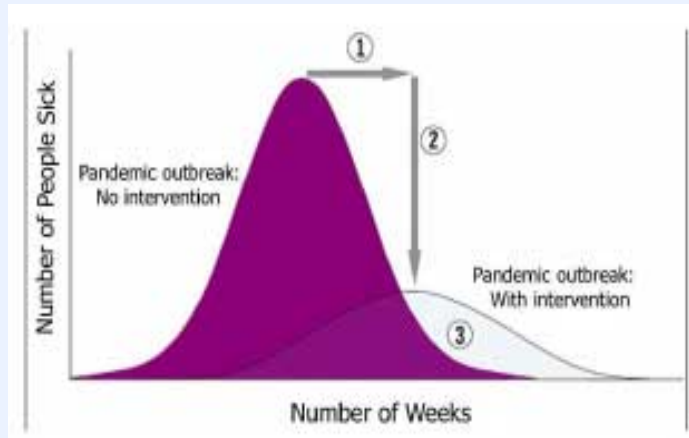


Importance of Non-Medical Strategies

- ☐ Help to slow the spread of flu
- ☐ “Buy time” for production & distribution of an effective vaccine and anti virals
- ☐ Decrease epidemic peak & lessen the impact of the flu pandemic
- ☐ Reduce total number of cases; reduce deaths

If the illness is non-stopable why take these actions?

Lifecycle Of An Outbreak



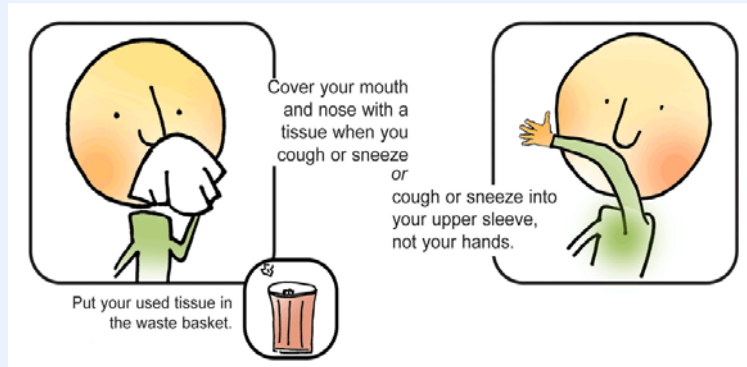
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H1N1 is here and we will not be able to stop it so our emphasis is on managing it to lessen the impact. What we are aiming for is to avoid this high sudden peak and try to keep the cases at a lesser number over a longer period of time. This stretching out of cases will help to allow our medical infrastructure to keep up with the demand for example for ICU respiratory beds.

Cover Your Cough and Sneeze



After coughing or sneezing, wash your hands with soap and warm water for 20 seconds.

Hand out "Cover Your Cough"

Again we are back to the bare basics but this is where prevention takes place

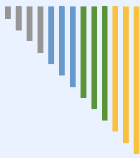


Message for Child Care

- ☐ Have a box of tissue on every table
- ☐ Teach children how to use tissues properly
- ☐ Teach children the cough/sneeze etiquette
- ☐ Give rewards when a child properly sneezes or coughs into a tissue and then follows with proper hand hygiene



Don't have to go across the room for tissue. If the cost is a problem you can do what the schools do and ask each family to donate a box of tissues.



Hand Hygiene

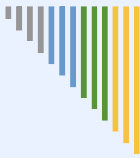
- Proper hand washing
- Keep hands away from eyes, nose and mouth.
- Everyone needs to be washing their hands immediately upon arrival for the day or when moving from one child care group to another



We all inadvertently touch surfaces such as a door knob, a table , a telephone . Remember the virus can live on a surface for up to eight hours. Who coughed on it or handled it last with contaminated hands? By touching your eyes, nose mouth you self inoculate through your mucus membranes.

As always hand washing is your best defense. All children and providers should be washing their hands upon arrival before touching anything in the program and when they move from one group to another along with all of the other designated times..

Also those who are caring for infants absolutely must use a barrier between the infant and their shoulder when burping, comforting, or just holding an infant.



Proper Use of Alcohol-Based Hand Sanitizer

- ☐ Use only when soap and water are unavailable
- ☐ Use only alcohol-based products
- ☐ Use according to manufacturer instructions
- ☐ Oversee the use of alcohol-based hand rubs by children
- ☐ Keep hand sanitizers out of the reach of children
- ☐ Wash hands with soap and water when you re-enter the facility

If used in a child care setting, such as during field trips when running water is not available, the sanitizer must be kept out of the reach of the children.

Alcohol hand sanitizers do not replace hand washing but are an alternative when running water is unavailable.

Explain to participants: Different hand sanitizer have different directions so each bottle must be read and the product used according to the manufacturers instructions.



Clean Environment

Germs can stay alive up to 4 hours, even weeks, on ...

Door knobs	Chairs
Light switches	Bathroom
Eating tables	Sinks
Soft and hard toys	Faucets
Floors	Changing tables
Tables	Telephones
Phones	High chairs
Cots	Keyboards, etc.

Handout the leaning and Sanitizing Chart

Remember that when an infected person coughs, sneezes, talks, sings the virus is put into the air in large airborne droplets that fall to a surface within about 3 feet. Keep your area clean and sanitized and your hands away from your face.



Proper Cleaning and Sanitizing

- ☐ **Clean** with soap/detergent and water. Remove all visible dirt. **Rinse.**
- ☐ **Sanitize** by spraying sanitizer until surface is glossy.
- ☐ **Leave** sanitizer on surface for **two minutes of contact.** Then air dry or wipe dry with a paper towel.

You all should be well aware of this by now.



To Exclude or Not to Exclude?

Who will make a decision about whether a **child** who is acutely ill can receive care in the child care program?

**“The child care provider,
not the child’s family.”**



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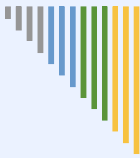
Please see the handout “the Daily Health Check”

During this pandemic flu outbreak the exclusionary criteria may of necessity be stricter than at normal times and it may change in response to a change in circumstances such as the severity of the flu or the number of cases.

You, the provider, need to keep informed of what the recommendations currently are. Use the CDC, Maryland and Early Childhood Services Web site listed at the end of this presentation to keep informed. Major occurrences will be emailed to you, so keep your email current with us.

CDC is recommending, and the county is in agreement, that a member of the general population or a student diagnosed with H1N1 or with influenza like illness be excluded from the program for 24 hours after the cessation of the fever without fever reducing medications. This holds true with or without anti viral medications. The guidelines for child care are in the CDC toolkit *Preparing for the Flu (Including 2009 H1N1 Flu)* Please monitor your resources at the end of this presentation for changes. This may change so it is important to keep checking your resources that are provided in this presentation.

Remember that you are focusing on the symptoms of pandemic flu; largely respiratory symptoms. People with the flu usually feel pretty badly so it is rather obvious they need to go home. Prompt identification and separation are very important. Separate them from the group ASAP to limit contact with non-infected people.



Let's Discuss...

Should this person be
excluded?

Why?

For how long?

Support your decision
with your resources.



Divide participants into group of four or five

Pass out scenarios

Discuss



Crowd Reduction/Social Distancing

- ☐ Dismissal of students from school public private, and universities and colleges for up to 12 weeks
- ☐ Cancellation of school based activities
- ☐ Community distancing to include reduction in out-of-school and community mixing

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This is also known as a community mitigation which refers to actions federal, state and local governments must take to prevent the spread of disease.

Social distancing is meant to minimize the kind of social contact that enables virus to transmit.

At this time closure is not highly probable but it is highly recommended that you have plan for that eventuality.

The dismissal of school and child care can certainly lead to problems. If child care is closed parents should not bring their children to their workplace. Nor should children be left unattended. Now is the time to discuss with your parents that they need to have back plans in the event that the program needs to close.

A suggestion may be made for parents to arrange activities for their children at home possibly with the support of two or three other families.

Closure will depend on the severity of the outbreak. There is always the possibility that you or a family member (FCC) or (center) so many staff become ill and you cannot remain open. These measures may be only applied to large and small centers while FCC with 6 or less children may be able to continue operations.

All is situational

Much is dependent on the availability of vaccine



Crowd Reduction/Social Distancing (continued)

- ☐ Cancellation of large public gatherings
- ☐ Changing workplace environments and schedules
- ☐ Ensure work-leave policies align to facilitate outbreak policies

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This would include such things as a church, sport events, the “mall”, Target, grocery stores, etc

Because we are already seeing resistance to the antiviral and it will take time to immunize the entire country the infection control measure used by the public may be critical in slowing the spread of the virus.

Avoiding handshakes


Child care may cohort children and staff. This entails keeping the same small group of children together with the same staff member.

Avoid lunchroom rush

Substitute tele-conferencing for face to face

Use larger conference rooms

Avoid using a communal computer, telephone, keyboard



Stay At Home Toolkit

- ☐ Personal Responsibility
- ☐ Be prepared to care for yourself and your family

August, 2009

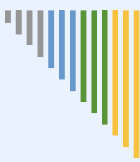
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Handout: *Stay At Home Toolkit* or refer the participants to the Montgomery County Md web site, type Stay at Home Toolkit in the search box.

Briefly review

Take away: I don't want to be standing next to you at CVS while you cough and spread the virus all over the place.



Wrap - up / closing

- ☐ Review today's goals
- ☐ Questions...
- ☐ Thank you so much for attending and for your work on behalf of children and families!

Discussion:

- Summarize the key concepts and objectives from the training session.
 - Explore the benefits of the COOP process
 - Learned about the elements of constructing a COOP, through the specific lens of a pandemic flu outbreak.
 - Explored each of the eight phases and now you will each have the tools you need to return to your center or family child care home and collaboratively develop a COOP with your stakeholders.
- Check back in with the "I want to know" flip chart. Are there questions that were not answered? If so, collect them and let participants know that the answers can be found and will be...
- Administer the post-test and give participants the evaluation.
- Thank the participants for their time and for their commitment to training in order to improve the way that they do business on behalf of children and families.



Additional Resources

- Maryland Department of Health and Mental Hygiene; www.marylandfluwatch.org
- Novel H1N1 Flu (Swine Flu) and You; Centers for Disease Control and Prevention; www.cdc.gov/h1n1flu/
- www.findaflushot.com
- Pandemic Flu and Child Care Training. Department of Maternal and Child Health, University of North Carolina at Chapel Hill.
- Pandemic Influenza Mitigation U.S. Department of Health and Human Services, Centers for Disease Control and Prevention.
- Stay At Home Toolkit for Influenza. Montgomery County Department of Health and Human Services.